

## INVESTMENT OPTION ELECTION FOR NEW ACCOUNTS RSA-1 DEFERRED COMPENSATION PLAN

Check all that apply:

☐ RSA-1 ☐ DROP Rollover

Retirement Systems of Alabama  
P. O. Box 302150 ♦ Montgomery, AL 36130-2150  
334-517-7000 or 877-517-0020  
[www.rsa-al.gov](http://www.rsa-al.gov)

Name \_\_\_\_\_  
First Middle/Maiden Last

Address \_\_\_\_\_  
Street or P. O. Box

City State Zip Code

Social Security Number \_\_\_\_\_ Date of Birth \_\_\_\_\_  
Month Day Year

Email Address \_\_\_\_\_ Phone Number \_\_\_\_\_

I understand the following regarding this investment option election:

- My election must be made prior to the funds being submitted or transferred.
- My election can be made once every **90 days**.
- My election will remain in effect until a subsequent election is made, but it must remain in effect for **90 days**.

### RSA-1 ACCOUNTS ONLY

I elect the following investment option for **future deferrals**. You can elect to have 100% in either the fixed or stock investment option election or split the percentages between the investment options – but they must add up to 100%, for example, 60% fixed and 40% stock or 35% fixed and 65% stock.

#### FIXED (BOND)

☐ Invest \_\_\_\_\_ % of **new deferrals** in the RSA-1 **FIXED (BOND)** investment option.

#### STOCK

☐ Invest \_\_\_\_\_ % of **new deferrals** in the RSA-1 **STOCK** investment option.

### DROP ROLLOVER ACCOUNTS ONLY

I elect the following investment option for **DROP funds**. You can elect to have 100% in either the fixed or stock investment option election or split the percentages between the investment options – but they must add up to 100%, for example, 60% fixed and 40% stock or 35% fixed and 65% stock.

#### FIXED (BOND)

☐ Invest \_\_\_\_\_ % of **DROP funds** in the RSA-1 **DROP FIXED (BOND)** investment option.

#### STOCK

☐ Invest \_\_\_\_\_ % of **DROP funds** in the RSA-1 **DROP STOCK** investment option.

### AUTHORIZATION

Signature of Employee \_\_\_\_\_ Date \_\_\_\_\_

STATE OF \_\_\_\_\_, COUNTY OF \_\_\_\_\_

Before me appeared \_\_\_\_\_, known to me to be the person who subscribed to the foregoing instrument on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

Signature of Notary Public \_\_\_\_\_

Seal

My Commission Expires \_\_\_\_\_